

MAINE DEPARTMENT OF CONSERVATION
BUREAU OF PARKS & LANDS
MUNICIPAL GRANT-IN-AID PROGRAM

REQUEST FOR REIMBURSEMENT

COUNTY _____ TRAIL NAME/NUMBER _____

PERIOD COVERED BY THIS STATEMENT _____ TO _____

ADMINISTRATIVE COSTS

Processing of land use permits

ADMINISTRATIVE TOTAL...\$ _____

DEVELOPMENT (Including items below)

Brush removal, improving grade,
initial sign erection, etc. \$

Bridges (includes culverts) \$ _____

Facilities (trash cans, tables,
toilets, shelters, etc.) \$ _____

Parking Areas \$

DEVELOPMENT TOTAL.....\$ _____

MAINTENANCE

Equipment repairs, rentals, labor gas, oil, etc.

Normal brushing, bridge repair, sign maintenance, etc.

Labor \$ _____ Hours _____ Equipment _____ Hours _____

Materials (lumber, nails, paint, stakes, etc.)\$ _____

MAINTENANCE TOTAL.....\$ _____

TOTAL AMOUNT OF INVOICE.....\$ _____

50% OF INVOICE STATE SHARE....\$ _____

TOTAL AMOUNT OF GRANT (STATE) \$ _____

TOTAL EXPENDITURES TO DATE \$ _____

BALANCE \$ _____

ACCOMPLISHMENTS

LAND

Percent of trail mileage on public land _____ %

Percent of trail mileage on private land _____ %

Number of Use Permits _____

DEVELOPMENTS

Miles of trail constructed _____

Number of bridges constructed _____

Number of parking areas _____

MAINTENANCE

Trail Width _____

Number of miles maintained _____

Number of gallons of fuel consumed _____ (Use D for diesel,
G for gas)

I hereby certify that the materials and/or services shown on the attached invoices have been delivered, that this is my only original invoice, and is correct and just, that said expenses have been paid by this community and that no part of same has been included in previous reimbursement requests.

MUNICIPALITY _____ **COUNTY** _____

SIGNATURE _____ **TITLE** _____

DATED _____

THIS INVOICE APPROVED FOR PAYMENT BY:

SUPERVISOR, ATV PROGRAM

DATED

Fed.I.D. No. _____

Encumb. No. _____

Reimbursement Amount \$ _____

Appr. No. 014-04A-8330-832-6331